2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V67438

Entity Name: MORGAN COMTEC, INC.

FILED Jan 07, 2004 Secretary of State

lew Principal Place of Business:

9645 NAVARRE PKY NAVARRE, FL 32566

Current Mailing Address: New Mailing Address:

1114 E. COLLINWOOD CIRCLE PO BOX 283 OPELIKA, AL 36801

FEI Number: 59-3150078 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HURD, THOMAS C JR
9637 NAVARRE PARKWAY
NAVARRE, FL 32566 US
HURD, THOMAS C JR
9645 NAVARRE PKY
NAVARRE, FL 32566 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 01/07/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

Name: HURD, CLINT Name: HURD, THOMAS C

Address: 1114 E. COLLINWOOD CIRCLE Address: 1114 E. COLLINWOOD CIRCLE

City-St-Zip: OPELIKA, AL 36801 City-St-Zip: OPELIKA, AL 36801

Title: STD () Delete Title: () Change () Addition

 Name:
 HURD, ROSE ANNE
 Name:

 Address:
 1114 E. COLLINWOOD CIRCLE
 Address:

 City-St-Zip:
 OPELIKA, AL 36801
 City-St-Zip:

() Delete Title: Title: VD VD (X) Change () Addition MORGAN, CONSTANTINA D Name: MORGAN, CONSTANTINA D Name: 9637 NAVARRE PARKWAY 9645 NAVARRE PARKWAY Address: Address: City-St-Zip: NAVARRE, FL 32566 City-St-Zip: NAVARRE, FL 32566

Title: D () Delete Title: () Change () Addition

 Name:
 SEGREST, CHARLES D
 Name:

 Address:
 634 CARY DRIVE
 Address:

 City-St-Zip:
 AUBURN, AL 36608
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 STEPHENS, SELDAN H
 Name:
 STEPHENS, SELDEN H

 Address:
 259 TUTHILL LANE
 Address:
 259 TUTHILL LANE

 City-St-Zip:
 MOBILE, AL 32566
 City-St-Zip:
 MOBILE, AL 32566

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS C HURD PRES 01/07/2004